FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORÁTION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 539880 1. Corporation Name

MELDISCO K-M GAINESVILLE, FLA., INC.

#4047

Mailing Address

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90068 010 ***150.00



Fillicipal Flac	e or business	Manning Address					
2552 NW 13TH STREET GAINESVILLE FL 32605		933 MACARTHUR BLVD MAHWAH NJ 07430					
US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 07/25/1977		
2 Principal P	lace of Business	2a. Mailing Address	 -		4. FEI Number Applied For		
-		26			22-2162303 Not Applicable		
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional		
_		27			5. Certifcate of Status Desired Fee Required		
22 City & Stat	Α		City & State		6. Election Campaign Financing S5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible		
24	25	29 30			Personal Property Tax. Yes No		
	9. Name and Address of Curre				10. Name and Address of New Registered Agent		
			81	Name			
UNITED STATES CORPORATION COMPANY			<u> </u>				
1201 HAYES ST			82	Street /	Address (P.O. Box Number is Not Acceptable) -		
	E 105		83				
	AHASSEE FL 32301]**	J			
.,,			84	City	85 Zip Code		
				L	FL		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes of Florida, Such change was aut	s, the above	e-named the como	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered		
agent. I a	im familiar with, and accept the obligi	ations of, Section 607.0505, Florid	da Statutes	i.	334.2 3. 3. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.		
SIGNATURE							
alolivi ore	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: F	legistered Ager	nt signature re	equired when reinstating) DATE		
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	Į V	☐ DELETE	1.1 TITLE	Į	☐ Change ☐ Addition		
NAME	PROFFITT, RANDALL S		1.2 NAME	i			
STREET ADDRESS	933 MACARTHUR BLVD.		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MAHWAH NJ		1.4 CITY-S	T-ZIP			
TITLE	D DELETE 2.13		2.1 TITLE		☐ Change ☐ Addition		
NAME.	PALIZZI, ANTHONY		2.2 NAME				
STREET ADDRESS	ALCO MEDIO DESCED		2.3 STREET	T ADDRESS			
CITY-ST-ZIP	TROY MI		2. 4 CITY-S				
TITLE			3.1 TITLE	,, 2	☐ Change ☐ Addition		
	SHEPARD, JEFFREY	—	3.2 NAME				
NAME	COLUMN CAPTURE DIAM			T ADDRESS			
STREET ADDRESS	MAHWAH NJ						
CITY-ST-ZIP		DELETE	3.4. CITY-5	51 - ZIP	☐ Change ☐ Addition		
TITLE	AT THOMAS	□ nere₁€	4.1 TITLE				
NAME	WOJNO, THOMAS		4, 2 NAME				
STREET ADDRESS	I .	,		TADDRESS			
CITY-ST-ZIP	MAHWAH NJ		4.4 CITY-S	T-ZIP			
TITLE	AT	DELETE	5.1 TITLE		ASSI, TREAS.		
NAME	JOHNSON, MARK		5.2 NAME		THOMAS DALIMINI		
STREET ADDRESS	1			TADDRESS	THOMAS BAUMLIN		
CITY-ST-ZIP	MAHWAH NJ		5.4 CITY-S	T-ZIP	933 MacARTHUR BLVD., MAHWAH, NJ 177430 Addition		
TITLE	S	☐ DELETE	6.1 TITLE		Addition		
NAME	RICHARDS, MAUREEN		6.2 NAME				
STREET ADDRESS	AND MAD ADTILLED BLUE		6.3 STREE	TADDRESS	,		
CITY+ST-ZIP	MAHWAH NJ		6.4 CITY-S	T-ZIP	•		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.